



October 14, 2013

Austin, TX
5929 Balcones Drive, Suite 200
Austin, TX 78731-4280
Phone: 512.343.2544
Fax: 512.343.0119

VIA ECFS

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, D.C. 20554

RE: **WC Docket Nos. 10-90 and 11-42**
Annual Report Pursuant to 47 C.F.R. §§ 54.313 and 54.422

Dear Ms. Dortch:

Cumby Telephone Cooperative, Inc. (SAC 449004), by its authorized representative, files its FCC Form 481 - Carrier Annual Reporting Data Collection Form in compliance with 47 C.F.R. §§ 54.313 and Section 54.422.

The FCC Form 481 has been completed, certified, and submitted to the Universal Service Administrative Company (USAC).

A copy of the FCC Form 481 was also submitted to the state regulatory commission pursuant to §§ 54.313(i) and 54.422(c).

Please contact me if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Lisa A. McLaughlin".

Lisa A. McLaughlin
Authorized Representative for
Cumby Telephone Cooperative, Inc.

LM/pjf

Attachment

cc: Ms. Karen Zimmerman, Cumby Telephone Cooperative, Inc.

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	449004
<015> Study Area Name	CUMBY TEL COOP INC
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Esther Stonaker
<035> Contact Telephone Number: Number of the person identified in data line <030>	903-994-2211
<039> Contact Email Address: Email of the person identified in data line <030>	stonaker@cumbytel.com

ANNUAL REPORTING FOR ALL CARRIERS			54.313 Completion Required	54.422 Completion Required
(check box when complete)				
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report				
<300> Unfulfilled Service Requests (voice)	<input type="text" value="0"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<310> Detail on Attempts (voice)	(attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<330> Detail on Attempts (broadband)	(attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	<input type="text" value="0.0"/>			
<420> Mobile				
<430> Number of Complaints per 1,000 customers (broadband)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<440> Fixed				
<450> Mobile				
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> <input type="text" value="449004tx510"/>	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> <input type="text" value="449004tx610"/>	(attached descriptive document)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/>	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<1000> Voice Services Rate Comparability	(check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<1010> <input type="text"/>	(attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<1100> Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	(if not, check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<1110>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<3005>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	449004
<015>	Study Area Name	CUMBY TEL COOP INC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Esther Stonaker
<035>	Contact Telephone Number - Number of person identified in data line <030>	903-994-2211
<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
If your answer to Line <110> is yes, do you have an existing §54.202(a) "5		
<111>	year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

- <112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

 Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How (USF) was used to improve service quality
- <116> How (USF) was used to improve service coverage
- <117> How (USF) was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

<010>	Study Area Code	449004
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-- See attached worksheet --

<010>	Study Area Code	449004
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1/1/2013	
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-- See attached worksheet	
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OMB Control No. 3060-0986/OMB Control No. 3060-0819
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[illegible]

**(900) Tribal Lands Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	449004
<015>	Study Area Name	CUMBY TEL COOP INC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Esther Stonaker
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<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select (Yes,No, NA)

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	449004
<015>	Study Area Name	CUMBY TEL COOP INC
<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

<1120> Please check this box to confirm no terrestrial backhaul
options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box to confirm the reporting carrier offers
broadband service of at least 1 Mbps downstream and 256 kbps
upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	449004
<015>	Study Area Name	CUMBY TEL COOP INC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Esther Stonaker
<035>	Contact Telephone Number - Number of person identified in data line <030>	903-994-2211
<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans 449004tx1210

Name of attached document (.pdf)

<1220> Link to Public Website HTTP

“Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒

<1222> Details on the number of minutes provided as part of the plan, ☒

<1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

FCC Form 481

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification {47 CFR § 54.313(b)(1)}
- <2011> 3rd Year Certification {47 CFR § 54.313(b)(2)}

☐
☐
Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification

☐
☐
☐
☐
Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

- <2016> Certification Support Used to Build Broadband

☐
Connect America Phase II Reporting {47 CFR § 54.313(e)}

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached PDF , on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.
- <2021> Interim Progress Community Anchor Institutions

☐
☐
☐
☐

Name of Attached Document Listing Required Information

**Certification - Reporting Carrier
Data Collection Form**

 FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

<010>	Study Area Code	449004
<015>	Study Area Name	CUMBY TEL COOP INC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Esther Stonaker
<035>	Contact Telephone Number - Number of person identified in data line <030>	903-994-2211
<039>	Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	449004
<015> Study Area Name	CUMBY TEL COOP INC
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<030> Contact Name - Person USAC should contact regarding this data	Esther Stonaker
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<039> Contact Email Address - Email Address of person identified in data line <030>	stonaker@cumbytel.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>Lisa McLaughlin</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	Lisa McLaughlin
Name of Reporting Carrier:	CUMBY TEL COOP INC
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 10/09/2013
Printed name of Authorized Officer:	Karen Zimmerman
Title or position of Authorized Officer:	General Manager
Telephone number of Authorized Officer:	903-994-2211
Study Area Code of Reporting Carrier:	449004 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	CUMBY TEL COOP INC
Name of Authorized Agent or Employee of Agent:	Lisa A. McLaughlin
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 10/09/2013
Printed name of Authorized Agent or Employee of Agent:	Lisa A. McLaughlin
Title or position of Authorized Agent or Employee of Agent:	Manager - Business Compliance
Telephone number of Authorized Agent or Employee of Agent:	512-343-2544
Study Area Code of Reporting Carrier:	449004 Filing Due Date for this form: 10/15/2013
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

LINE 510 - SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION RULES COMPLIANCE

Cumby Telephone Cooperative, Inc. (the Cooperative) complies with applicable service quality standards and consumer protection rules as required by the state regulatory commission and the Federal Communications Commission.

The rates, terms, and conditions under which the Cooperative operates are outlined in its Telephone Services Tariff, which is approved by the state commission. The Cooperative's tariff contains provisions regarding its customer service and protection practices, including resolving disputes with the Cooperatives, applying for service, the classification of business and residential rates, deposits, billing and payment for service, refusal, disconnection and cancellation of service. The tariff is available for customer review in the Business Office, as requested. Rates and terms of service are disclosed to customers upon application for service both verbally and in writing as part of a packet of information for new customers.

Service quality standards are established by the state commission and the Cooperative consistently meets or exceeds the standards and provides reports to the state commission, in accordance with the state commission's rules.

The protection of customers' privacy and information is of utmost importance and the Cooperative has a policy and established operating procedures that comply with the FCC's Customer Proprietary Network Information Rules (47 C.F.R. §§64.2001-64.2011). Certification and a description of those operating procedures are filed at the FCC annually.

LINE 610 - ABILITY TO FUNCTION IN EMERGENCY SITUATIONS

Cumby Telephone Cooperative, Inc. (the Cooperative) is able to function in emergency situations. The Cooperative has a reasonable amount of back-up power to ensure functionality without an external power source. Standby power generators are supplied at the central office, remote switch sites, and repeater sites to ensure functionality without an external power source until power is restored. The network is capable of managing traffic spikes resulting from emergency situations.

The Cooperative is able to reroute traffic around damaged facilities. Although the Cooperative's ability to reroute traffic around damaged facilities is not absolute and may be limited in certain circumstances, there is a restoration plan in place for expeditious recovery of service, including splicing of damaged facilities when warranted.

Line 1210 – Terms & Conditions of Voice Telephony Lifeline Plans

Cumby Telephone Cooperative, Inc., (the Cooperative) provides customers subscribing to Lifeline, federal and state discounts to their monthly tariffed residential local exchange access line rate of \$10.00. The local exchange access line rate includes an unlimited amount of local calling minutes. Additional charges for toll calls associated with the stand-alone residential access line are billed at the rates of the long distance carrier chosen by the subscriber. The Cooperative does not offer plans specifically for Lifeline customers but the same federal and state discounts apply to any bundles or packages with voice telephony service that are available to residential subscribers. Attached are the pages from the Cooperative's Telephone Services Tariff including pages describing the terms and conditions of Lifeline service.

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program

The Lifeline Program is a retail local service offering designed to make telephone service available at reduced rates to qualifying low-income customers.

1. General

- a. A qualifying low-income customer subscribing to the Lifeline Program shall receive federal and state reductions to their monthly tariffed residential local exchange access line rate. When a Lifeline customer subscribes to a package of services, those same reductions will apply to that portion of the package rate that is for basic network service. In a two-line package, only one line will receive the Lifeline reductions.
- b. Nothing in this section shall prohibit a customer who is otherwise eligible for the Lifeline Program from obtaining and using telecommunications equipment and services designed to aid such customer in utilizing qualifying telecommunications services.
- c. The Lifeline Program rate reductions do not apply to long distance service, 976 and other information related telecommunications services, custom calling features, or other ancillary services which may or may not be tariffed. Customers may obtain these services, where available, at their discretion.
- d. The Lifeline Program rate reductions do not apply to service connection charges. (T)
(D)
(D)
- e. The Cooperative may not disconnect the local service of a Lifeline Program customer for the non-payment of toll charges. However, the Cooperative reserves the right to implement toll blocking, at no charge, if the customer incurs a significant balance of unpaid toll bills. The Cooperative will inform the customer, by direct mail, of this change to their service due to the customer's non-payment of toll charges. Upon the customer's payment of all outstanding toll charges, the Cooperative will remove the block without additional cost to the customer. (T)

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

1. General (Continued)

- f. Upon subscribing to the Lifeline Program, a customer will be offered a subscription, at no charge, to total toll blocking service or to a limit on the amount of toll calling (in exchanges where technically available); however, the customer is under no obligation to accept toll blocking upon initial subscription to the Lifeline Program. (T)
- g. The Cooperative will provide Customers who apply for or receive Lifeline service access to available vertical services or custom calling features, including Caller ID, Call Waiting, and Call Blocking, at the same price as its other Customers pay, provided that the Cooperative has the capability to provide such services. (T)
- h. The Lifeline Program rate reductions will not be available on a retroactive basis unless approved by the Public Utility Commission of Texas or the Low-Income Discount Administrator (LIDA). (T)

2. Designated Lifeline Program Services

- The Cooperative shall offer telephony services that provide the following functionalities as designated Lifeline Program services: (T)
- a. Voice grade access to the public switched network or its functional equivalent;
 - b. Minutes of use for local service provided at no additional charge to the customer;
 - c. Access to emergency services;
 - d. Toll blocking services. (T)

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

3. Eligibility Requirement

a. Qualifying Low-income (Eligible) Customer Criteria

An eligible customer shall be defined as an individual who participates in one of the following programs:

- 1) Medicaid
- 2) Food Stamps (Supplemental Nutrition Assistance Program) (T)
- 3) Supplemental Security Income (SSI)
- 4) Federal Public Housing Assistance (FPHA)
- 5) Low-Income Home Energy Assistance Program (LIHEAP)
- 6) State Child Health Plan (CHIP)
- 7) National School Lunch Program's Free Lunch Program (N)
- 8) Temporary Assistance for Needy Families (N)

The Lifeline Program rate reductions will be provided per eligible customer. The Low-Income Discount Administrator (LIDA) will provide a list of eligible customers to the Cooperative.

b. Obligations of the Customer

- 1) Customers whose annual household income is at or below 150% of the federal poverty guidelines but do not receive benefits under Medicaid, Food Stamps, SSI, FPHA, LIHEAP and the CHIP programs may provide the LIDA with self-enrollment for Lifeline Program benefits. LIDA can be reached at 1-866-4LITEUP.
- 2) Current customers receiving benefits under these programs will be subject to the Lifeline Program automatic enrollment procedures as provided by the LIDA unless they provide a written request to the LIDA to be excluded from the Lifeline Program.
- 3) A customer who is eligible for the Lifeline Program, but does not have telephone service shall be responsible for initiating a request for the Lifeline Program from the Cooperative.

c. Obligations of the Cooperative

- 1) LIDA will provide a list of eligible customers to the Company on a monthly basis. Upon receipt of the list, the Company shall begin reduced billing for those customers within 30 days.

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

3. Eligibility Requirement (Continued)

d. Discontinuance of Service

- 1) Discontinuance of Lifeline Discounts for customers automatically enrolled: The eligibility period for automatically enrolled customers is the length of their enrollment in TDHS benefits plus a period of 60 days for renewal. Automatically enrolled customers will have an opportunity to renew their TDHS benefits or self-enrollment with LIDA upon the expiration of their automatic enrollment. (T)
- 2) Discontinuance of Lifeline Discounts for customers who have self-enrolled: Individuals not receiving benefits through TDHS programs, but who have met Lifeline income qualifications, are eligible to receive the Lifeline Discount for seven months, which includes a period of 60 days during which the customer may renew their eligibility with LIDA for an additional seven months. (T)

4. Deposit and Credit Requirements

The Cooperative will not charge a service deposit in order to initiate the Lifeline Program if the eligible customer voluntarily elects to receive toll blocking.

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

4. Deposit and Credit Requirements (Continued)

- b. The Cooperative may charge a service deposit if the eligible customer denies subscription to toll blocking upon subscribing to the Lifeline Program.
- c. In instances where the Cooperative may require a service deposit, the same credit verification procedures and deposit regulations used for all applicants who apply for service with the Cooperative are also applicable to eligible customers for the Lifeline Program.

5. Service Connection Charges

- a. Service connection charges do not apply to eligible customers with existing, qualifying service converting to the Lifeline Program.
- b. Service connection charges do apply when:
 - 1) Existing eligible customers requesting additional non-qualifying services at the time Lifeline Program reduced billing is initiated.
 - 2) New customers (those without existing local exchange access service) eligible for the Lifeline Program and establishing qualifying service.
 - 3) Any subsequent moves or changes after initial connection to the Lifeline Program.

(D)
|
|
(D)

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

6. Lifeline Program Rate Reduction

a. Implementation

The Cooperative shall provide reduced billing for all Lifeline Program eligible customers within its service area in accordance with the Commission's Substantive Rules.

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(D)

In instances where the customer inquires about participation in the Lifeline Program, the Cooperative shall provide contact information for LIDA.

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(D)

LOCAL EXCHANGE SERVICE

II. APPLICATION OF RATES (Continued)

B. Lifeline Program (Continued)

6. Lifeline Program Rate Reduction (Continued)

b. Amounts

The Cooperative shall apply Lifeline Program rate reductions, per eligible customer, as described below.

		<u>Monthly Rate Reduction</u>		
1)	Federal Reduction	See 47 C.F.R. Section 54.403		
2)	Maximum State Reduction to Residential Local Exchange Access Line Rate	\$3.50		
3)	Additional State Reduction To Residential Local Exchange Access Line Rate*	<u>Verizon</u>	<u>Sprint/ CenturyLink</u>	(T) (T) (C)
		\$2.45	\$2.41	

*TUSF Settlement Docket No. 40521

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LOCAL EXCHANGE SERVICE

III. LOCAL EXCHANGE SERVICE RATES AND CHARGES

A. Residence Monthly Local Exchange Access Rates ⁽¹⁾⁽²⁾

<u>Brashear, Lone Oak, Miller Grove:</u>	<u>Monthly Rate</u>	
1-Party Service	\$10.00	(I)
Additional Line	\$ 8.50	
Expanded Local Calling Service (ELC)	\$ 3.50	
Toll Restriction	\$ 1.50 ⁽³⁾	
Digital Subscriber Line (DSL)	\$39.95	

B. Residence Monthly Local Exchange Access Rates ⁽¹⁾⁽²⁾

<u>All other exchanges:</u>	<u>Monthly Rate</u>	
1-Party Service	\$10.00	(I)
Additional Line	\$ 6.00	
Expanded Local Calling Service (ELC)	\$ 3.50	
Toll Restriction	\$ 1.50 ⁽³⁾	
Digital Subscriber Line (DSL)	\$39.95	

⁽¹⁾Rates do not include a charge for an instrument or other customer premises equipment.

⁽²⁾The appropriate non-recurring charges in Section 2 apply in addition to the monthly rates.

⁽³⁾The Secondary Order Charge in Section 2 applies when adding Toll Restriction to an existing account.

LOCAL EXCHANGE SERVICE

III. LOCAL EXCHANGE SERVICE RATES AND CHARGES (Continued)

E. Residential Package Discounts⁽¹⁾

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1. Basic Package

Local Phone Service (1-Party Service)
Expanded Local Calling (ELC)
Call Waiting
Inside Wire Maintenance

\$1.50 Credit

2. Basic Plus Package

Local Phone Service (1-Party Service)
Expanded Local Calling (ELC)
Auto Redial
Calling Name Delivery
Call Return
Call Waiting
Inside Wire Maintenance

\$3.00 Credit

3. Communications Package

Two Local Exchange Access Lines (Including 1-Party
Service and Expanded Local Calling on Both Lines)
Features on one line:
Auto Redial
Calling Name Delivery
Call Return
Call Waiting
Inside Wire Maintenance

\$4.50 Credit

⁽¹⁾Individual features listed in each discount package can also be subscribed to separately.
Applicable rates are set forth in Section 2 and Section 4 of this Tariff.

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LOCAL EXCHANGE SERVICE

IV. LOCAL EXCHANGE SERVICE PACKAGE – Residential

	Monthly Rate ⁽¹⁾	
Cumby Flex Pak	\$75.85	
- Two Access Lines with ELC or EAS		(T)
- OPTIONAL SERVICES – Pick any or All Services ⁽³⁾		
- Call Forwarding Busy/No Answer		
- Call Block		
- Call Waiting/Cancel Call Waiting		
- Remote Access to Call Forwarding		
- Speed Dial (8 numbers)		
- Three Way Calling		
- Call Return		
- Selective Call Forwarding		
- Caller ID Name and Number		
- Anonymous Call Rejection		
- LONG DISTANCE CALLING PLAN ⁽²⁾⁽⁵⁾		
- Nationwide Calling – 600 minutes		
- INTERNET SERVICE ⁽⁴⁾		
- 2Mbps Broadband Service with Unlimited Internet Access		
- UPGRADE LONG DISTANCE SERVICE FOR ⁽²⁾⁽⁵⁾		
<i>Save on Personal Touch Long Distance Calling Plans</i>		
- Unlimited Nationwide Calling	\$15.00	
- UPGRADE BROADBAND SERVICES TO ANY PACKAGE ⁽⁴⁾		
<i>For an additional charge per month</i>		
- 4Mbps Broadband Service	\$20.00	
- 6Mbps Broadband Service	\$40.00	
- High-Speed Modem Protection	\$2.99	
- Wireless Router Equipment Charge	\$3.99	
- Email Accounts	\$2.00	

⁽¹⁾ Rates do not include applicable state and federal taxes. The End User Common Line Charge, as approved in the Cooperative's Interstate Access Service Tariff, National Exchange Carrier Association, Inc. Tariff FCC No. 5, is not included in the package price.

⁽²⁾ Package subscribers must subscribe to Personal Touch Long Distance. Upgrade Long Distance Minutes to unlimited plan for an additional fee of \$15.00 per month.

⁽³⁾ Customers can choose any or all features on one or both lines.

⁽⁴⁾ Broadband Service is provided by Cumby Telephone. DSL/Internet Service is available on one access line. Speed for an additional monthly fee.

Upgrade to Broadband 4: \$20.00 more per month

Upgrade to Broadband 6: \$40.00 more per month

⁽⁵⁾ Toll Calling is provided by Personal Touch Long Distance. Additional minutes above package minutes are at 10 cents per minute. Both access lines share the minutes in each calling plan. Certain restrictions apply.